

**STATE OF ALASKA
APPLICATION FOR AN INDEPENDENT CANDIDATE**

Return this application and the signature pages to:

**Division of Elections
PO Box 110017
Juneau, AK 99811-0017**

We, the attached named qualified voters of the State of Alaska, hereby petition that

_____ appear on the ballot as an independent candidate for
Name of Independent Candidate

President of the United States at the next succeeding presidential general election under
AS 15.30.026.

***Note: The Director of Elections may not include on the ballot as part of candidate's name, any honorary or assumed title or prefix but may include in the candidate's name any nickname or familiar form of a proper name of the candidate. [AS 15.15.030(4)]**

CONTACT PERSON:

ALTERNATE CONTACT PERSON:

NAME: _____

ADDRESS: _____

PHONE #: _____

Signature of Designated Contact Person
Representing the Independent Candidate

Date